Adopted

Rejected

## **COMMITTEE REPORT**

YES: 11 NO: 0

## MR. SPEAKER:

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Your Committee on Public Health, to which was referred House Bill 1325, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill **be amended** as follows:

Page 3, delete lines 6 through 42, begin a new paragraph and insert:

"(f) Not later than September 1, 2005, the committee shall submit recommendations to the secretary of the office of the secretary of family and social services and the governor concerning the redesign of the Indiana prescription drug program established by IC 12-10-16-3 to coordinate the program with the federal Medicare prescription drug benefit program. The

7 8 recommendations must include the following:

9 (1) Methods, including automatic enrollment, that the state 10 should use to ensure that current Indiana prescription drug program enrollees are enrolled in the federal Medicare prescription drug benefit program.

13 (2) Changes to the financial eligibility level requirements for 14 the Indiana prescription drug program, including eligibility 15 requirements that include individuals whose income does not

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1	exceed two hundred percent (200%) of the federal poverty
2	level (as defined by IC 12-15-2-1).
3	(3) Methods to assist current enrollees in the Indiana
4	prescription drug program in completing applications and to
5	determine eligibility in the Medicare drug beneficiary subsidy
6	program.
7	(4) Changes to benefits offered under the Indiana prescription
8	drug program, including the following:
9	(A) Coverage for federal Medicare prescription drug
0	benefit:
1	(i) deductibles; or
2	(ii) premiums.
3	(B) Coverage for prescription drug costs that are not
4	covered by the federal Medicare prescription drug benefit
5	or the federal Medicare prescription drug plans.
6	(5) Methods to maximize use of federal funding available to
7	Indiana under the federal Medicare Modernization Act to
8	maximize enrollment in:
9	(A) the federal Medicare prescription drug benefit
20	program; and
21	(B) the Indiana prescription drug program.
22	The committee shall make recommendations in a manner that
23	would expend but not exceed the Indiana prescription drug
24	program's budget.
25	(g) The office of the secretary of family and social services may
26	(1) implement the recommendations made by the committee
27	under subsection (f);
28	(2) act as the authorized representative and signatory to
29	complete:
0	(A) any federal low income Medicare drug beneficiary
1	subsidy application; and
52	(B) any federal Medicare prescription drug benefit
3	application; and
4	(3) enroll eligible individuals for the Indiana prescription drug
55	program and the federal Medicare prescription drug

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	1	benefit program.".	
	2	Page 4, line 1, strike "not".	
		(Reference is to HB 1325 as introduced.)	
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and when	n so amend	ed that said bill do pass.	
		_	 Representative Becker
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